

Parks Volunteer Application (A public records check may be completed on volunteers.)

Name of volunte	eer:								
Address:									
					Email Address:				
	ergency Contact Name: Phone: ason for volunteering (scouts, school, etc.):								
Reason for volu	nteering (scouts,	school, etc.):							
Location (park, I	building, etc.) wl	nere you would li	ke to vo	unteer:					
This project to b	e completed by	(check one):							
	Individual (pleas	e indicate your age	e:)	Group (ag	ge range of volu	nteers:)	
	Number of supe	ervisors (age 18 a	nd over)	One ac	lult per every tv	velve voluntee	ers age 12 or you	ınger required	
Name	of group:					Total	number of volun	teers:	
CECTION A /or		l d dia a dia a		14		1			
SECTION A (CC	ompiete ii you are	volunteering time	and need	to be as	signea to a project,)			
Please list spec	ific interests and	l experience rele	vant to t	he type o	of project desired	:			
Number of volur	nteer hours wan	ted (if applicable):							
Availability	Monday	Tuesday	Wedne	esday	Thursday	Friday	Saturday	Sunday	
Date									
Hours									
SECTION B (co.	molete if you alre:	ady have a project	nlanned)						
•								,	
Please attach a	brief description	n of the proposed	d project	^ (use the	e back of this page	, or attach a se _l	parate sheet, if nec	essary):	
*Include the follo									
-	•	<u>d,</u> include the na	me, add	ress, and	d phone number	of an adult sup	ervisor.		
 Proposed s Project mate 	•	ng dates. blied by volunteer	r(c)						
,		olied by Voldineer							
•	• • •	posal (for addition	,		nent nature – bench,	etc.) [available i	from FCPRD] or		
	•	er projects) [available		-		· -	-		
DI : (1	" ! ! !		·						
•		r er and return th nteer Coordinator		For offic	ce use only: Please	route to the pe	ople whose names	have been marked.	
аррисаціон ю.	430 Pine Ave			☐ Direc	ctor		Assistant Director		
	Frederick, MD	21701		⊔ Park Park □	s Superintendent_ Naturalist	 	Park Foreman Museum Curator		
For more informa	tion call 301-600-	6640.		☐ Rec.	Specialist		Volunteer Coord_		



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SECTION C (<u>every</u> volunteer must complete)

Groups must complete a Group Waiver (individuals under the age of 18 – individual waiver must be signed by parent/guardian)

Frederick County Parks and Recreation reserves the right to terminate any project at any time if the project time-frame and/or the criteria of the project are not met, or for any other reason deemed necessary.

By my signature below, I acknowledge that there are inherent risks and dangers associated with recreation programs, activities, and park projects. Therefore, I hold Frederick County Commissioners and its agents harmless from all claims for injuries, damage, or loss which may result from my, and/or my child(ren)'s, participation in the volunteer project listed above.

By signing below, I, and/or my child(ren), agree to abide by the rules and requirements. I agree to allow the Frederick County Parks and Recreation Division to take and utilize photos, slides, and video images of me or my child(ren) for the purpose of promotion and publicizing of the Division's programs and/or events. If I prefer to not allow these image(s) to be utilized, I will call 301-600-1684 to register my request.

			Date://	
Signature of volunteer (If volunteer under 18	TION D (to be completed by the Division) Your application to do volunteer work for the Parks and Recreation Division has been reviewed and accepted. Please review the information below, sign where appropriate, and then return this form. Thank you for your interest in volunteering. Unfortunately, at this time, the Division is unable to use your volunteer server lift you have any questions, please call the Volunteer Coordinator at 301-600-6640. The properties of Division Representative: Date:			
SECTION D (to be completed by the Division)				
			•	
	3	•	•	service
Signature of Division Representative:		Date:/	_/	
NAME OF ASSIGNED PROJECT				
The following staff member has been assigne Please report to	d to assist you:on		at	<u> </u>
(Location) Assigned work hours:		(Date)	(Time)	_
NAME OF PROPOSED PROJECT				
The following staff member has been assigne	d to assist you:			
Any changes to the proposal which the Division	on deems necessary are liste	ed below or on an atta	ched sheet:	
				_
By my signature below, I agree to the above of	changes proposed by the Fre	ederick County Parks	and Recreation Division.	_
Volunteer name (printed)	Signature	of volunteer:	Date://	